

Form **990-T****Exempt Organization Business Income Tax Return**
(and proxy tax under section 6033(e))

OMB No 1545-0687

For calendar year 2017 or other tax year beginning JUL 1, 2017, and ending JUN 30, 2018 **1806****2017**Department of the Treasury
Internal Revenue Service

Go to www.irs.gov/Form990T for instructions and the latest information

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3)

Open to Public Inspection for
501(c)(3) Organizations Only

A <input type="checkbox"/> Check box if address changed B Exempt under section <input checked="" type="checkbox"/> 501(c) <u>03</u>) <input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e) <input type="checkbox"/> 408A <input type="checkbox"/> 530(a) <input type="checkbox"/> 529(a)	Print or Type	Name of organization (<input type="checkbox"/> Check box if name changed and see instructions) AMERICAN COLLEGE OF RADIOLOGY	D Employer identification number (Employees' trust, see instructions) 36-2261602
		Number, street, and room or suite no If a P.O. box, see instructions. 1891 PRESTON WHITE DRIVE	E Unrelated business activity codes (See instructions) 531190 900099
		City or town, state or province, country, and ZIP or foreign postal code RESTON, VA 20191	
C Book value of all assets at end of year 198,602,971.		F Group exemption number (See instructions)	
		G Check organization type <input checked="" type="checkbox"/> 501(c) corporation <input type="checkbox"/> 501(c) trust <input type="checkbox"/> 401(a) trust <input type="checkbox"/> Other trust	

H Describe the organization's primary unrelated business activity. SEE STATEMENT 1

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? ☐ Yes ☒ No
If "Yes," enter the name and identifying number of the parent corporation

J The books are in care of DIANE MULLIS Telephone number (703) 648-8900

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1 a Gross receipts or sales				
b Less returns and allowances				
c Balance	1c			
2 Cost of goods sold (Schedule A, line 7)	2			
3 Gross profit Subtract line 2 from line 1c	3			
4 a Capital gain net income (attach Schedule D)	4a			
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b			
c Capital loss deduction for trusts	4c			
5 Income (loss) from partnerships and S corporations (attach statement)	5			
6 Rent income (Schedule C)	6			
7 Unrelated debt-financed income (Schedule E)	7	26,278.	17,090.	9,188.
8 Interest, annuities, royalties, and rents from controlled organizations (Sch F)	8			
9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)	9			
10 Exploited exempt activity income (Schedule I)	10	1,447,059.	37,443.	1,409,616.
11 Advertising income (Schedule J)	11			
12 Other income (See instructions, attach schedule) STATEMENT 2	12	75,833.		75,833.
13 Total. Combine lines 3 through 12	13	1,549,170.	54,533.	1,494,637.

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions) (Except for contributions, deductions must be directly connected with the unrelated business income)			
14 Compensation of officers, directors, and trustees (Schedule K)		14	
15 Salaries and wages		15	
16 Repairs and maintenance		16	
17 Bad debts		17	
18 Interest (attach schedule)		18	
19 Taxes and licenses		19	80,953.
20 Charitable contributions (See instructions for limitation rules) STATEMENT 5	SEE STATEMENT 3	20	140,918.
21 Depreciation (attach Form 4562)	21		
22 Less depreciation claimed on Schedule A and elsewhere on return	22a	22b	
23 Depletion		23	
24 Contributions to deferred compensation plans		24	
25 Employee benefit programs		25	
26 Excess exempt expenses (Schedule I)		26	
27 Excess readership costs (Schedule J)		27	
28 Other deductions (attach schedule) SEE STATEMENT 4		28	3,500.
29 Total deductions Add lines 14 through 28		29	225,371.
30 Unrelated business taxable income before net operating loss deduction Subtract line 29 from line 13		30	1,269,266.
31 Net operating loss deduction (limited to the amount on line 30)		31	
32 Unrelated business taxable income before specific deduction. Subtract line 31 from line 30		32	1,269,266.
33 Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions)		33	1,000.
34 Unrelated business taxable income Subtract line 33 from line 32 If line 33 is greater than line 32, enter the smaller of zero or line 32		34	1,268,266.

Part III Tax Computation**35 Organizations Taxable as Corporations** See instructions for tax computation.Controlled group members (sections 1561 and 1563) check here ☒ See instructions and

a Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order).

(1) \$ 29,035. (2) \$ 25,000. (3) \$ 1,214,231.

b Enter organization's share of (1) Additional 5% tax (not more than \$11,750) \$ 11,750.

(2) Additional 3% tax (not more than \$100,000) \$

c Income tax on the amount on line 34

SEE STATEMENT 6

35c 351,458.

36 Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 34 from:☐ Tax rate schedule or ☐ Schedule D (Form 1041)

36

37 Proxy tax See instructions

37

38 Alternative minimum tax

38

39 Tax on Non-Compliant Facility Income See instructions

39

40 Total Add lines 37, 38 and 39 to line 35c or 36, whichever applies

40 351,458.

Part IV Tax and Payments**41a** Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)

b Other credits (see instructions)

c General business credit. Attach Form 3800

d Credit for prior year minimum tax (attach Form 8801 or 8827)

e **Total credits** Add lines 41a through 41d

41e

42 Subtract line 41e from line 40

42 351,458.

43 Other taxes Check if from ☐ Form 4255 ☐ Form 8611 ☐ Form 8697 ☐ Form 8866 ☐ Other (attach schedule)

43

44 Total tax Add lines 42 and 43

44 351,458.

45a Payments A 2016 overpayment credited to 2017

b 2017 estimated tax payments

c Tax deposited with Form 8868

d Foreign organizations: Tax paid or withheld at source (see instructions)

e Backup withholding (see instructions)

f Credit for small employer health insurance premiums (Attach Form 8941)

g Other credits and payments: ☐ Form 2439☐ Form 4136 ☐ Other Total

45a	184,899.
45b	181,000.
45c	110,000.
45d	
45e	
45f	
45g	

45 475,899.

46 Total payments. Add lines 45a through 45g**47 Estimated tax penalty** (see instructions) Check if Form 2220 is attached ☐

47

48 Tax due If line 46 is less than the total of lines 44 and 47, enter amount owed

48

49 Overpayment If line 46 is larger than the total of lines 44 and 47, enter amount overpaid

49 124,441.

Enter the amount of line 49 you want. Credited to 2018 estimated tax 124,441.

Refunded

50 0.

Part V Statements Regarding Certain Activities and Other Information (see instructions)

51 At any time during the 2017 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country here

Yes	No
	X

52 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If YES, see instructions for other forms the organization may have to file.

	X
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53 Enter the amount of tax-exempt interest received or accrued during the tax year \$**Sign Here**

Under penalties of perjury I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer *Diane C. Muller* Date 5/10/19

CFO Title

May the IRS discuss this return with the preparer shown below (see instructions)? ☒ Yes ☐ No**Paid Preparer Use Only**

Print/Type preparer's name

Preparer's signature

Date

Check ☐ if self-employed

PTIN

JULIA FLANNERY, CPA

Julia Flannery

MAY 10 2019

P00928918

Firm's name RSM US LLP

Firm's EIN 42-0714325

100 INTERNATIONAL DRIVE, SUITE 1400

Firm's address BALTIMORE, MD 21202

Phone no. 410-246-9301

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Schedule A - Cost of Goods Sold. Enter method of inventory valuation **►** N/A

1 Inventory at beginning of year	1		6 Inventory at end of year	6	
2 Purchases	2		7 Cost of goods sold Subtract line 6 from line 5. Enter here and in Part I, line 2	7	
3 Cost of labor	3				
4a Additional section 263A costs (attach schedule)	4a		8 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?	Yes	No
b Other costs (attach schedule)	4b				
5 Total Add lines 1 through 4b	5				

Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)

(see instructions)

1 Description of property

(1)
(2)
(3)
(4)

2 Rent received or accrued		3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	
(1)		
(2)		
(3)		
(4)		
Total	0.	Total 0.

(c) Total income Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A)

(b) Total deductions

Enter here and on page 1, Part I, line 6, column (B)

0.

Schedule E - Unrelated Debt-Financed Income (see instructions)

1 Description of debt-financed property	2 Gross income from or allocable to debt-financed property	3 Deductions directly connected with or allocable to debt-financed property		
		(a) Straight line depreciation (attach schedule) STATEMENT 7	(b) Other deductions (attach schedule) STATEMENT 8	
(1) RENT INCOME FROM DEBT FINANCED PROPERTY	38,418.	7,876.	17,109.	
(2)				
(3)				
(4)				
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5 Average adjusted basis of or allocable to debt-financed property (attach schedule)	6 Column 4 divided by column 5	7 Gross income reportable (column 2 x column 6)	8 Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1) 3,634,404.	5,313,086.	68.40 %	26,278.	17,090.
(2)		%		
(3)		%		
(4)		%		
Totals			26,278.	17,090.
Total dividends-received deductions included in column 8				0.

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Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

1 Name of controlled organization	2 Employer identification number	Exempt Controlled Organizations			
		3 Net unrelated income (loss) (see instructions)	4 Total of specified payments made	5 Part of column 4 that is included in the controlling organization's gross income	6 Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					

Nonexempt Controlled Organizations					
7 Taxable income	8 Net unrelated income (loss) (see instructions)	9 Total of specified payments made	10 Part of column 9 that is included in the controlling organization's gross income	11 Deductions directly connected with income in column 10	
(1)					
(2)					
(3)					
(4)					
			Add columns 5 and 10 Enter here and on page 1, Part I, line 8, column (A)	Add columns 6 and 11 Enter here and on page 1, Part I, line 8, column (B)	
Totals			0.	0.	0.

Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

1 Description of income	2 Amount of income	3 Deductions directly connected (attach schedule)	4 Set-asides (attach schedule)	5 Total deductions and set-asides (col 3 plus col 4)
(1)				
(2)				
(3)				
(4)				
		Enter here and on page 1, Part I, line 9, column (A)		Enter here and on page 1, Part I, line 9, column (B)
Totals		0.		0.

Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1. Description of exploited activity	2 Gross unrelated business income from trade or business	3 Expenses directly connected with production of unrelated business income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3) If a gain, compute cols 5 through 7	5. Gross income from activity that is not unrelated business income	6. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1) CAREER CENTER	1,339,154.	37,443.	1,301,711.			
(2) WEBSITE ADVERTISING	107,905.		107,905.			
(3)						
(4)						
		Enter here and on page 1, Part I, line 10, col (A)	Enter here and on page 1, Part I, line 10, col (B)			
Totals		1,447,059.	37,443.			0.

Schedule J - Advertising Income (see instructions)**Part I Income From Periodicals Reported on a Consolidated Basis**

1. Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5 Circulation income	6 Readership costs	7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
Totals (carry to Part II, line (5))		0.	0.			0.

Part II **Income From Periodicals Reported on a Separate Basis** (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

1 Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7	5 Circulation income	6 Readership costs	7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
Totals from Part I	0.	0.				0.
Totals, Part II (lines 1-5)	Enter here and on page 1, Part I, line 11, col (A) 0.	Enter here and on page 1, Part I, line 11, col (B) 0.				Enter here and on page 1, Part II, line 27 0.

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1 Name	2 Title	3 Percent of time devoted to business	4 Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total Enter here and on page 1, Part II, line 14			0.

FORM 990-T	DESCRIPTION OF ORGANIZATION'S PRIMARY UNRELATED BUSINESS ACTIVITY	STATEMENT 1
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CAREER CENTER, DEBT-FINANCED INCOME, WEBSITE ADVERTISING,
MEMBER INSURANCE, DISALLOWED FRINGES

TO FORM 990-T, PAGE 1

FORM 990-T	OTHER INCOME	STATEMENT 2
DESCRIPTION		AMOUNT
MEMBER INSURANCE PLANS		2,572.
AMOUNTS PAID FOR DISALLOWED FRINGES		73,261.
TOTAL TO FORM 990-T, PAGE 1, LINE 12		75,833.

FORM 990-T	CONTRIBUTIONS	STATEMENT 3
DESCRIPTION/KIND OF PROPERTY	METHOD USED TO DETERMINE FMV	AMOUNT
2017 CONTRIBUTIONS	N/A	873,750.
TOTAL TO FORM 990-T, PAGE 1, LINE 20		873,750.

FORM 990-T	OTHER DEDUCTIONS	STATEMENT 4
DESCRIPTION		AMOUNT
PROFESSIONAL FEES		3,500.
TOTAL TO FORM 990-T, PAGE 1, LINE 28		3,500.

FORM 990-T

CONTRIBUTIONS SUMMARY

STATEMENT 5

QUALIFIED CONTRIBUTIONS SUBJECT TO 100% LIMIT

CARRYOVER OF PRIOR YEARS UNUSED CONTRIBUTIONS

FOR TAX YEAR 2012

FOR TAX YEAR 2013

FOR TAX YEAR 2014

FOR TAX YEAR 2015

326,926

FOR TAX YEAR 2016

553,900

TOTAL CARRYOVER

880,826

TOTAL CURRENT YEAR 10% CONTRIBUTIONS

873,750

TOTAL CONTRIBUTIONS AVAILABLE

1,754,576

TAXABLE INCOME LIMITATION AS ADJUSTED

140,918

EXCESS 10% CONTRIBUTIONS

1,613,658

EXCESS 100% CONTRIBUTIONS

0

TOTAL EXCESS CONTRIBUTIONS

1,613,658

ALLOWABLE CONTRIBUTIONS DEDUCTION

140,918

TOTAL CONTRIBUTION DEDUCTION

140,918

FORM 990-T

LINE 35C TAX COMPUTATION

STATEMENT 6

1.	TAXABLE INCOME		1,268,266	
2.	LESSER OF LINE 1 OR FIRST BRACKET AMOUNT . .		29,035	
3.	LINE 1 LESS LINE 2		1,239,231	
4.	LESSER OF LINE 3 OR SECOND BRACKET AMOUNT . .		25,000	
5.	LINE 3 LESS LINE 4		1,214,231	
6.	INCOME SUBJECT TO 34% TAX RATE		1,214,231	
7.	INCOME SUBJECT TO 35% TAX RATE		0	
8.	15 PERCENT OF LINE 2		4,355	
9.	25 PERCENT OF LINE 4		6,250	
10.	34 PERCENT OF LINE 6		412,839	
11.	35 PERCENT OF LINE 7		0	
12.	ADDITIONAL 5% SURTAX		11,750	
13.	ADDITIONAL 3% SURTAX		0	
14.	TOTAL INCOME TAX			435,194
15.	TAX AT 21% RATE EFFECTIVE AFTER 12/31/2017		266,336	
			DAYS	
16.	TAX PRORATED FOR NUMBER OF DAYS IN 2017	184	219,385	
17.	TAX PRORATED FOR NUMBER OF DAYS IN 2018	181	132,073	
18.	TOTAL TAX PRORATED	365		351,458

FORM 990-T

SCHEDULE E - DEPRECIATION DEDUCTION

STATEMENT 7

DESCRIPTION	ACTIVITY NUMBER	AMOUNT	TOTAL
DEPRECIATION		7,876.	
- SUBTOTAL -	1		7,876.
TOTAL OF FORM 990-T, SCHEDULE E, COLUMN 3(A)			7,876.

FORM 990-T

SCHEDULE E - OTHER DEDUCTIONS

STATEMENT 8

DESCRIPTION	ACTIVITY NUMBER	AMOUNT	TOTAL
BUILDING EXPENSES		17,109.	
- SUBTOTAL -	1		17,109.
TOTAL OF FORM 990-T, SCHEDULE E, COLUMN 3(B)			17,109.

FORM 990-T

SCHEDULE I - EXPENSES DIRECTLY CONNECTED WITH
PRODUCTION OF UNRELATED BUSINESS INCOME

STATEMENT 9

DESCRIPTION	ACTIVITY NUMBER	AMOUNT	TOTAL
SALARY AND BENEFITS		5,614.	
TELEPHONE		43.	
PROFESSIONAL SERVICES		30,000.	
MEETINGS		285.	
MARKETING AND ADVERTISING		1,501.	
- SUBTOTAL -	1		37,443.
TOTAL OF FORM 990-T, SCHEDULE I, COLUMN 3			37,443.